



Responsible Adult Information Student Overnight Travel—AA414

To be submitted by adult supervisors/chaperones as per district policy AA414, II.8.
(Must be at least 21 years of age)

School _____ Group _____

To _____ On _____
Destination Dates of Trip

Name _____
Last First MI

Home Address _____
Street City Zip

Home Phone _____ Work Phone _____ Cell Phone _____

*Under no circumstance can your responsibility be delegated to an unapproved chaperone. Students can only be released to their parent/guardian.

1. Have you ever been convicted of a crime or pled no contest to a crime involving abuse of a minor or exploitation of a minor? Yes No
If yes, please indicate the date and circumstances of the event.

2. Have you ever been convicted of a crime or pled no contest to a felony or any crime involving moral turpitude or fail the required criminal background check? Yes No
If yes, please explain.

I affirm that I am an adult 21 years of age or older and that the foregoing information is true and correct to the best of my knowledge. I also affirm that I understand that while I am traveling with this Jordan School District group, I am obligated to comply with all directives, policies, guidelines and procedures pertaining to overnight travel for the Jordan School District. I understand that my conduct and dress must be appropriate for the supervision of students. I agree not to use alcohol or other drugs during the duration of this travel. Non-compliance, as determined by school officials, may mean removal from the activity.

Date Signature

I am traveling as a chaperone (paid by school/district) I am traveling as a volunteer chaperone (paying my own expenses)

State of Utah
County of Salt Lake

On _____, 20____, _____ personally appeared before me,
_____ who is personally known to me
_____ whose identity I proved on the basis of _____
_____ whose identity I proved on the oath/affirmation of _____
to be the signer of the above document, and he/she acknowledged that he/she signed it.

Notary Public